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Date: Fri, 6 May 94 16:09:13 EDT
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Subject: Naval Service Medical News (NSMN) 94-15 [R(2712)]

R 060426Z MAY 94 ZYB
FM BUMED WASHINGTON DC//00//
SUBJ/PUBLIC AFFAIRS-NAVAL SERVICE MEDICAL NEWS (NSMN) (94-15)//
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RMKS/1. THIS SERVICE IS FOR GENERAL DISTRIBUTION OF INFORMATION AND NEWS OF INTEREST TO NAVY AND MARINE CORPS MEMBERS, CIVILIAN EMPLOYEES, FAMILY MEMBERS AND RETIRED BENEFICIARIES OF NAVY MEDICINE. MAXIMUM AND TIMELY REDISTRIBUTION OR FURTHER REPRODUCTION AND USE BY ACTION ADDRESSEES IS ENCOURAGED. THIS MESSAGE HAS BEEN COORDINATED WITH THE COMMANDANT OF THE MARINE CORPS (CMC). THE COMMANDANT HAS AUTHORIZED TRANSMISSION TO MARINE CORPS ACTIVITIES.

2. HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:
(940114)-First Lady Speaks to Navy Nurse Corps
(940115)-Director of Navy Nurse Corps Honored
(940116)-Bulgarians Visit U.S. Naval Hospital Naples
(940117)-Puget Sound Federal Health Council Honored with Award
(940118)-Navy Medical Department People in Special Operations
(940119)-Grand Round Abstracts
(940120)-HEALTHWATCH: How to Spot Chicken Pox -- and What to Do
(940121)-Clean Air Month -- May 1994 (para 3)

HEADLINE: First Lady Speaks to Navy Nurse Corps
BUMED Washington (NSMN) -- Hillary Rodham Clinton addressed a gathering of Navy Nurse Corps officers today, the closing day of their week-long Navy Nurse Corps Executive Conference held in Falls Church, VA.

The First Lady's remarks "reaffirm what I've been saying for the last year and a half," said Navy Surgeon General VADM Donald F. Hagen, MC.

Welcoming Clinton to the conference were Secretary of the Navy John Dalton; his Special Assistant for Health Affairs Pat Hanen; Hagen; RADM Maryanne Ibach, NC, USNR; and CAPT Joan Engel, NC, who was recently selected for promotion to rear admiral and will be the next director of the Navy Nurse Corps.

Clinton opened her remarks with praise for the high standards of nurses, which she has observed first-hand in the Navy nurses at the White House. She also noted that today is National Nurses Day, the kick-off for National Nurses Week.

In discussing Health Reform and how it relates to military medicine, Clinton called on the Navy nurses to continue working to bring DOD's military health plan (MHP) into harmony with

National Health Reform. MHP, she said, will give military family members and retirees "more choice in all the President's programs."

Health Reform, said Clinton, "establishes MHP with support from civilian health care providers." Military members will be automatically enrolled in MHP, which "will be at least as good as the President's plan," she said.

Clinton noted that MHP will receive reimbursement from MediCare for those over 65 treated in the military system. "This is important," she said, "for the military and for the VA (Veterans Affairs), because family members and veterans should be protected and have the same guarantees that all other Americans will get." MHP also will receive premium payments from private (civilian) employers, she said.

Clinton spoke of increasing the roles and responsibilities of nurses, recounting her talks with civilian nurses across the country, many of whom were prior military. They are "frustrated with the regulation and lack of authority they face on a daily basis," she said, "unlike their experience in the military where they had the authority and respect to do their jobs. They wish they had the same in civilian life." To fulfill that wish, Clinton said, "We will preempt state requirements and regulations that limit nurses' roles and responsibilities. Instead, we will try to create teamwork that we believe in. Some states are already doing this." This will help "to eliminate the subordinate role that nurses play."

Clinton emphasized that the President's plan for MHP will maintain military readiness and enhance commitment to the entire military family. "Through the President's programs," she said, "we want to improve access and choice. Every American deserves access, (for which) we need to outlaw preexisting conditions and lifetime limits on medical (insurance) coverage."

"We want to expand choice with MHP for its members -- for those under 65 to have preventive health care to provide the solid base for later years and thus reduce the impact on the health care system."

Clinton noted the need to expand MediCare to include prescription drugs. "How ironic," she said, "that we provide the care for our elderly but not the medications that will sustain them. Instead they end up either not buying the needed drugs or they self-medicate."

Clinton also spoke of the need for options besides nursing homes, such as home-based health care that allows families to "provide the care and the love that their family members need." She also cited the "need to put health care providers back into direct control of the patient -- not the insurance company or the alliance (and) the need to eliminate the paperwork that doesn't promote patient care. . . .

"The care provider needs to be part of a team -- each with more respect," Clinton concluded, saying "the only way to get there is to reform the system."

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HEADLINE: Director of Navy Nurse Corps Honored

ANA/AONE Washington (NSMN) -- RADM Marianne Stratton, NC, director of the Navy Nurse Corps, will be among those honored by the American Nurses Association and the American Organization of Nurse Executives in "A Salute to Nurses in Congress and the Executive Branch" in Washington, DC, on 10 May. Also at the salute, a special research grant will be announced in memory of the President's mother, Virginia Kelley, who was a certified registered nurse anesthetist.

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HEADLINE: Bulgarians Visit U.S. Naval Hospital Naples

USNH Naples, Italy (NSMN) -- Five Bulgarian nurses and a pharmacist visited U.S. Naval Hospital Naples recently, escorted by CDR Brasington of the U.S. European Command's Military-to-Military Contact Program.

The program is designed to enhance United States and Eastern European relations, support emerging democracies and share mutual unclassified information in specialty areas such as military medicine.

This was the first Navy Medicine Familiarization Tour for nurse corps officers and presented a unique opportunity to orient former Warsaw Pact countries to the variety of roles Navy nurses fill as administrators, supervisors and clinicians.

While visiting, the Bulgarians toured the hospital, Branch Medical Clinic Gaeta, and USS Belknap (CG 26). They also spent time enjoying the many sights of Naples and sampling the delicious food. They were amazed at the scope of responsibility undertaken by Navy nurses and hospital corpsmen. In Bulgaria, physicians must do many of the procedures that our corpsmen and nurses perform. However, the role of the nurse in Bulgaria is not a small task. The hospitals there are very large and perform most of the same procedures as found in any large U.S. hospital.

Overall, the visit was very enjoyable and informative for both the Bulgarians and USNH Naples' nurse corps officers.

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HEADLINE: Puget Sound Federal Health Council Honored with Award

NAVHOSP Bremerton, WA (NSMN) -- The Puget Sound Federal Health Council, consisting of individuals from all federal health care organizations in the Puget Sound area, was recently chosen as a finalist in the annual USA Today and RIT College of Business Quality Cup competition.

The Quality Cup competition recognizes individuals and teams who make significant contributions to the improvement of quality products or services in an organization. The Puget Sound Federal Health Council was selected for its efforts in cost-saving. Through joint-purchasing contracts, sharing laboratory testing facilities and improvement of pharmaceutical dispensing services by purchasing generic drugs, the council saved \$2.8 million dollars over the past two years.

For this year's awards, more than 400 nominations were received from Fortune 500 companies, government agencies, not-for-profit groups and small businesses nationwide. From those applications, a total of 14 finalists were chosen in five

categories: service firms, manufacturing firms, not-for-profit institutions, government units and agencies of government, and organizations with fewer than 500 employees. The Puget Sound Federal Health Council competed in the government category and was honored with the other finalists in that category (Birmingham Public Schools, PRO/Martin Marietta).

At the awards presentation in Virginia, LT Terry Lane of Naval Hospital Bremerton helped accept the award on behalf of the Puget Sound Federal Health Council, which consists of individuals from the 62nd Medical Squadron, McChord; 92nd Medical Group, Fairchild Air Force Base; American Lake VA Medical Center; Naval Hospital Bremerton; Madigan Army Medical Center; Naval Hospital Oak Harbor; Pacific Medical Center; Naval Medical Clinic Seattle; Seattle VA Medical Center; and U.S. Coast Guard Support Center.

The awards presentation was highlighted with summaries from the finalists about the accomplishments that earned them the prestigious Quality Cup award.

Story by ENS Kendra Scroggs, MSC, USNR

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HEADLINE: Navy Medical Department People in Special Operations
BUMED Washington (NSMN) -- Wherever the Navy or Marine Corps goes, so does the Navy Medical Department. Thirty percent of our personnel are normally assigned with deployable fleet and fleet marine forces units. Additional medical support is provided for operations such as Provide Promise. Here is the latest update on where our medical people are on assignment.

Medical forces currently on operational assignment are:

Operation Southern Watch

Total medical/dental personnel: 110 (includes eight BUMED augmentees)

USS Carl Vinson (CVN 70) Carrier Battle Group (CVBG): The CVBG has 79 ward beds, one operating room, eight intensive care beds, four quiet room beds and has a medical/dental staff of 56.

In Country: Attached with the Administrative Support Unit Bahrain are six physicians, two dentists, three nurses, one Medical Service Corps (MSC) officer and 39 corpsmen. BUMED also provides one corpsman to augment the COMUSNAVCENT staff, which is located adjacent to ASU Bahrain.

Operation Provide Promise (The Former Yugoslavia)

Total medical/dental personnel: 254 (includes 181 BUMED augmentees)

USS Saratoga (CV 60) Carrier Battle Group (CVBG): The CVBG has 60 ward beds, one operating room, eight intensive care beds, four quiet room beds and has a medical/dental staff of 73.

LCDR Gail Regan, MSC, from BUMED (MED 24) is located at Camp Pleso, Zagreb, Croatia, and is acting as the Environmental Health Officer for the UNPROFOR located in country.

The U.N. Hospital at Camp Pleso is staffed by 180 personnel assigned to Fleet Hospital 6. These personnel were taken from Navy Medical commands located throughout the HSO (Healthcare Support Office) San Diego region.

Operation Joint Task Force Full Accounting
Navy physicians and independent duty corpsmen are supporting this

operation by volunteering to serve tours ranging from just under two weeks to two months. Naval Hospital Camp Pendleton, CA, is providing an IDC to augment a mission that is currently in country. Six of the nine missions to Southeast Asia identified for FY94 have been completed.

Operation Continue Hope

USS Peleliu (LHA 5) Amphibious Ready Group (ARG): The ARG has 70 ward beds, six operating rooms, seven quiet room beds, 460 overflow beds, 17 intensive care beds and has a medical/dental staff of 121.

Exercise Support

Individuals and components of mobile medical augmentation readiness teams (MMARTs) support various exercises and operations as required, bolstering the "organic" medical assets of the units involved.

Surgical Team 2 (minus): Nine people -- two physicians, two nurses and five corpsmen from Naval Medical Center Portsmouth, VA, are providing MMART surgical team coverage for Operation Support Democracy (Haiti).

Fleet Surgical Teams are also deployed to provide additional medical support where needed, as directed by the CINCs.

Miscellaneous OCONUS and Fleet Support

Providing TAD (temporary additional duty) support to 14 fleet platforms and six OCONUS facilities are 88 Navy Medical Department personnel: 10 physicians, 11 nurses, five MSCs, 17 hospital corpsmen and 45 non-medical personnel.

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HEADLINE: Grand Round Abstracts

BMC Key West, FL (NSMN) -- On 21 April, a Navy petty officer came into the Branch Medical Clinic Key West complaining that his lips and mouth began tingling after he ate kiwi fruit 15 minutes earlier. His symptoms quickly progressed to swelling of his face and mouth, nausea, difficulty in breathing and bradycardia. He was having a severe anaphylactic reaction to the exotic fruit he had eaten. The quick intervention of LT Richard Green, MC, and his staff saved this Navy man's life. Bravo Zulu to the medical staff at Key West.

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BUMED Washington (NSMN) -- In a 12 April ceremony, HM2 Frederick F. Kolberg, assigned as a tracking analyst for MC, NC and MSC at the Bureau of Medicine and Surgery, received a Letter of Commendation for providing quick and decisive medical care to a neighbor who had collapsed at a community pool last summer. Kolberg's actions were "key to saving the man's life, and were in keeping with the highest traditions of the Hospital Corps and the Naval Service," read the letter, signed by Navy Surgeon General VADM Donald F. Hagen, MC. Bravo Zulu HM2 Kolberg.

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UNPROFOR Zagreb, Croatia (NSMN) -- CDR Nancy Owen, NC, is having an exciting year. First, she deployed with personnel from Fleet Hospital 6 to staff the 60-bed U.N. hospital in Zagreb that

provides health care for the United Nations Protection Force. Then she found out she has a cousin, Ankica Bican, just 20 miles south of Zagreb in Sisak and had the opportunity to meet her.

Owen speaks no Croatian; her cousin speaks no English. But, she told Frank Bodani of the Dispatch Sunday News in her hometown of York, PA, "Words didn't have to be said. She kept looking at me. She kept pinching my face. ... She probably saw in me family, as I saw in her family.

"It was linking Croatia with the United States after all those years." Owen's grandmother had emigrated to America in the early 1900s but had only been able to bring the youngest of her three children.

And, finally, Owen was recently selected for promotion to captain.

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HEADLINE: HEALTHWATCH: How to Spot Chicken Pox -- and What to Do
USNH Yokosuka, Japan (NSMN) -- "I think my child has the chicken pox. What can I do for him?" It's a common question at the Pediatric Clinic of U.S. Naval Hospital Yokosuka.

Chicken pox, or Varicella, is a very common childhood illness that may also infect adults. The disease is caused by a virus called Varicella Zoster, and there is no cure with medicine. Those infected must cure themselves with their own immune system.

Treatment focuses on the symptoms -- to help the child when he or she is sick. Currently there is no immunization or vaccination to prevent someone from developing chicken pox.

The Varicella Zoster virus comes from the secretions of the respiratory tract and, to a lesser degree, from the skin lesions of infected people.

Chicken pox is spread by droplet spray from the infected person and by objects contaminated by contact with skin lesions and mucous membranes of infectious people. By "droplet spray" we mean that, when an infected person coughs or sneezes, the virus is carried by spray in the air. People who are close by and breathe that same air may be taking the virus into their own respiratory systems and may develop chicken pox.

The incubation period is about two to three weeks and most commonly 13 to 17 days. That means that if your child was exposed to someone with chicken pox between two and three weeks ago, he or she may develop the rash at any time. A person with chicken pox is actually infectious (meaning they can spread it to others) from one day before they break out in the rash until all the vesicles (small blisters) have formed crusts.

The clinical symptoms include the following: slight fever, general body discomfort and decreased appetite for the first 24 hours. This is followed by the onset of a rash that itches.

The rash begins as flat, red spots on the skin that progress into raised red bumps and then to cloudy fluid-filled vesicles that break open and form crusts. The child may have all three stages of the rash at any given time. The rash is more predominant on the chest and back and spreads to the face and upper arms and legs, but is less prominent on the lower legs and

lower arms. The child may continue to have fever for a few days and may also have "swollen glands," be irritable and complain of itching.

Again, there is no cure for the disease, but the symptoms are treated. Benadryl or other antihistamines may be given orally, and calamine lotion or a paste of baking soda and water can be applied to the rash to decrease the itching. The child may take a bath every day. Clothes and linens should be changed daily.

When the child scratches at the sores, they can become infected with certain types of bacteria. Therefore, to prevent infection, it is suggested that parents keep their children's fingernails cut close and have them wash their hands with soap and water to keep them clean.

Mittens may be worn by a younger child who has trouble not scratching. An older child should be taught to apply pressure with a thumb to an itchy spot rather than scratch.

Although a child may have a shallow pink depression where the crusts had appeared, scarring is rare and not a major concern.

How is chicken pox controlled? The goal is to prevent the spread of the disease. Therefore, those who have it need to be isolated from those who don't. That means a school child with chicken pox should stay home until all the sores have formed crusts. Once children have had chicken pox, their bodies will develop their own defense against the disease, and they should be protected from the virus for the rest of their lives.

As with all children who are ill, they may need Tylenol for fever (do not use aspirin), extra fluids to drink and plenty of TLC -- Tender Loving Care -- as well as special activities in the home to keep them occupied.

Story provided by USNH Yokosuka's Pediatric Clinic

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3. Two-month calendar of events:

MAY

Asian-Pacific Heritage Month
National Physical Fitness and Sports Month
Better Hearing and Speech Month
Better Sleep Month
Correct Posture Month
Huntington's Disease Awareness Month
National Arthritis Month
National Asthma and Allergy Awareness Month
National Digestive Diseases Awareness Month
National High Blood Pressure Month
National Melanoma/Skin Cancer Detection and Prevention Month
National Mental Health Month
National Trauma Awareness Month
National Sight-Saving Month
National Bike Month
American Lung Association Clean Air Month
4 May - 6 June: 1994 Navy-Marine Corps Relief Society Fund Drive -- "Your Financial Contribution Stays in the Family"

6-12 May: National Nurses Week -- "Nurses: Charting the Course for a Healthy Nation" -- call (202) 554-4444, x239 for a media kit.

8 May: Mother's Day

8-14 May: National Hospital Week -- "Building a Healthy Tomorrow Today"

8-14 May: National Nursing Home Week

8-14 May: National Osteoporosis Prevention Week

8-14 May: National Running and Fitness Week

8-14 May: National Stuttering Awareness Week

8-14 May: SAFE KIDS Week

10 May: VOTE: Nebraska State Primary

10 May: VOTE: Pennsylvania State Primary

10 May: VOTE: West Virginia State Primary

11 May: BUPERS Night Detailing until 2200 EDT

12 May 1820: Florence Nightingale's Birthday

13 May 1908: Navy Nurse Corps Birthday

13 May: Military Spouse Day

15-21 May: Armed Forces Week -- "Peace through Readiness"

15-21 May: National Medical Transcriptionist Week

15-21 May: National Surgical Technologist Week

16 May: Naval Reserve 0-5/0-6 MC/DC/MSC/NC Boards Convene

17 May: VOTE: Oregon State Primary

18 May: National Employee Health and Fitness Day

21 May: Armed Forces Day -- "Peace through Readiness"

23-29 May: National Park Week

24 May: VOTE: Idaho State Primary

24 May: VOTE: Kentucky State Primary

24 May 1844: Samuel Morse telegraphed first official message -- "What hath God wrought?" -- when the line was formally opened between Baltimore and the U.S. Capitol building. An earlier test on May 1 sent news of Henry Clay's presidential nomination, which beat the train carrying the same message by one hour.

25 May: BUPERS Night Detailing until 2200 EDT

25 May: National Missing Children's Day

30 May: Memorial Day

31 May: VOTE: Arkansas State Primary

31 May: World No Tobacco Day

31 May: ENS FitReps Due

JUNE

Fireworks Safety Month (sponsored by Prevent Blindness America; call 1-800-331-2020 for more information)

National Hernia Month (1-800-322-BARD; in MA, 1-800-845-8852)

National Scleroderma Awareness Month (1-800-722-HOPE)

2 June: Career Nurse Assistants Day (216-825-9342)

2 June: Family Day

2 June: Teachers' Day

5-11 June: National Safety Week (708-692-4121, x18)

5-12 June: Safe Boating Week

6 June: E-7 Board Convenes

6 June 1944: D-Day -- Allied forces launch invasion of Normandy in northern France

7 June: National Health Care Recruiter Recognition Day
7 June: VOTE: Alabama, California, Iowa, Mississippi, Montana, New Jersey, New Mexico and South Dakota Primaries
9 June: Senior Citizens Day
13 June: Reserve O-4 MC Board Convenes
13 June: O-4 MC, DC, NC, MSC Boards Convene
14 June: VOTE: Maine, North Dakota, South Carolina and Virginia Primaries
14 June: Flag Day
17 June 1898: Navy Hospital Corpsman Birthday
19 June 1964: Civil Rights Bill passed
19 June: Father's Day
21 June: 1st Day of Summer
22 June 1944: First GI Bill of Rights signed
26 June-2 July: Helen Keller Deaf-Blind Awareness Week
(516-944-8900, x325)
28 June: VOTE: Utah Primary
28 June 1894: Labor Day established
30 June: E-4 Evaluations Due
30 June: Leap Second -- To bring the coordinated universal time (UTC) system into better agreement with the rotating earth, a leap second will be introduced on 30 June 1994. The leap second will necessitate retarding all UTC clocks by one second. To do this, 30 June 1994, 2359 and 60 seconds will be followed after one second by 1 July 1994, 0000 and 0 seconds.

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HEADLINE: Clean Air Month -- May 1994

CDC Atlanta, GA (NSMN) -- Since 1972, the American Lung Association (ALA) has sponsored Clean Air Week each May to educate the public about the relation between clean air and respiratory health. This year, Clean Air Week has been expanded to Clean Air Month; its theme, "Clean Air is Up to You" emphasizes the role of each person in promoting clean air.

Through local Clean Air Month activities, ALA will emphasize approaches -- such as driving less, conserving energy, keeping indoor air clean and supporting clean air regulations -- to reduce air pollution. Local ALA chapters will sponsor environmental health fairs, school presentations and other community events. Approximately 50 communities in the United States also will participate in the Clean Air Challenge, a pledge-based event to raise funds for local clean air programs and other efforts aimed at preventing lung disease. In addition, many local ALA offices will implement Clean Commute Day(s) to encourage motorists to try alternative forms of transportation (e.g., carpools, mass transit or bicycles).

Additional information about Clean Air Month and related activities is available from local ALA offices (telephone 1-800-586-4872) or from the national office (1740 Broadway, New York, NY 10019-4374; telephone 212-315-8700).

Reprinted from the Centers for Disease Control and Prevention's Morbidity and Mortality Weekly Report (MMWR) of 29 April 1994. That issue of the MMWR includes a report that provides estimates of the number of persons potentially exposed to particulate air

pollution.

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4. ADDRESSEES ARE ENCOURAGED TO SUBMIT INFORMATION AND NEWS ITEMS OF MEDICAL DEPARTMENT OR BENEFICIARY INTEREST (IN STORY FORMAT) BY TELEPHONE, FAX OR E-MAIL TO BUMED, ATTN: EDITOR, NAVAL SERVICE MEDICAL NEWS (MED 00P2). TELEPHONE (202) 653-0793; DSN 294-0793. FAX (202) 653-0086; DSN 294-0086. E-MAIL NMC0ENL@BUMED10.MED.NAVY.MIL.

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